

# APPLICATION TO VARY A FIREARM CERTIFICATE

Please use black ink and write in **BLOCK CAPITALS** throughout, except when signing. If you wish to provide any further information to that mentioned in this form, you must also sign and date that information.

**NOTE : THE CERTIFICATE TO BE VARIED MUST BE ENCLOSED WITH THIS FORM**

<p><b>PART A: Personal details.</b></p> <p>1. Gender      <input type="checkbox"/> Male                      <input type="checkbox"/> Female</p> <p>2. Title .....</p> <p>3. Surname .....</p> <p>a. Previous surname(s) .....</p> <p>.....</p> <p>4. Forenames (state all) .....</p> <p>.....</p> <p>5. Home address .....</p> <p>.....</p> <p>.....</p> <p>a. Postcode .....</p> <p>b. Tel number .....</p> <p>c. Mobile number .....</p> <p>d. E-mail .....</p> <p>6. Height .....</p> <p>7. Date of Birth .....</p> <p>a. Place of birth .....</p> <p>b. Nationality.....</p> <p>8. Occupation .....</p> <p>a. Work address .....</p> <p>.....</p> <p>.....</p> <p>b. Postcode .....</p> <p>c. Tel number .....</p>	<p><b>PART B: Personal health &amp; medical declaration</b></p> <p>9. Do you suffer from any medical conditions?</p> <p><input type="checkbox"/> <b>Yes</b> (If yes give details)                      <input type="checkbox"/> <b>No</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p>a. Have you ever received treatment for depression or any other kind of mental health condition?</p> <p><input type="checkbox"/> <b>Yes</b> (If yes give details)                      <input type="checkbox"/> <b>No</b></p> <p>.....</p> <p>.....</p> <p>.....</p> <p><b>10. Details of your GP / Specialist</b></p> <p>a. Name .....</p> <p>b. Address .....</p> <p>.....</p> <p>.....</p> <p>c. Postcode .....</p> <p>d. Tel number .....</p> <p>e. E-mail .....</p> <p><b>PART C: Offences</b></p> <p><b>11. Have you been convicted of any offence or received a written caution (not including parking) since your last application to grant or renew the certificate?</b></p> <p><input type="checkbox"/> <b>Yes</b>                      <input type="checkbox"/> <b>No</b></p> <p>(If yes, give details of <u>all</u> convictions and/or formal written cautions, binding overs and spent convictions, including those received outside Great Britain).</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
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12. If you wish to report the disposal of any firearms currently shown on your firearm certificate please give details below :

Calibre Metric/Imperial	Type	Make e.g. Winchester	Serial No

13. Details of firearms to be acquired :

Calibre Metric/Imperial	Type	Reason e.g. Target, vermin (please provide land/club details)

14. Details of the ammunition to be added or deleted :

**AMMUNITION TO BE ADDED**

Calibre Metric/Imperial	Quantity

**AMMUNITION TO BE DELETED**

Calibre Metric/Imperial

**DECLARATION**

The information I have given above is true and I understand that it is an offence under Section 29(3) of the Firearms Act 1968 to knowingly or recklessly make a false statement for the purpose of procuring a variation of a firearm certificate.

Signature .....

Print name .....

Date .....

**If the applicant is under 18 years of age the following details must be completed:**

Parent  Guardian

Signature .....

Print name .....

Date .....